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ABSTRACT

This brief paper summarizes the literature on academic accommodations for students with psychiatric disabilities. A definition of psychiatric disability precedes a brief summary of the following specific psychiatric diagnoses: depression, bipolar affective disorder; borderline personality disorder; schizophrenia; and anxiety disorders. Also noted are behavior or personality disorders specifically excluded from coverage under the Americans with Disabilities Act. Functional limitations of this population that may affect academic performance are then listed and defined. Among these are medication side effects, sustaining concentration, maintaining stamina, interacting with others, responding to negative feedback, responding to change, and severe test anxiety. Examples of appropriate instructional strategies are followed by a discussion of reasonable accommodations to provide these students with equal access to the curriculum. Examples are then given of classroom accommodations, examination accommodations, and assignment accommodations. Characteristics of accommodations that are not reasonable are also listed. The paper concludes with a resource list including Web site and contact information for the DO-IT (Disabilities, Opportunities, Internetworking, and Technology) Project. (DB)

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Academic Accommodations for Students with Psychiatric Disabilities

DO-IT

By Alfred Souma, Nancy Rickerson, and Sheryl Burgstahler

More than 400,000 students enrolled in American postsecondary institutions report having a disability (Lewis, Farris, & Greene, August 1999). Of that total population, over 33,000 report having a mental illness. Recent increases in the size of this group are due in part to improved medications that result in symptoms mild enough for them to enjoy the benefits and meet the challenges of postsecondary education (Weiner & Wiener, 1996). Students with psychiatric disabilities are entitled to reasonable academic accommodations as provided by the American Disabilities Act (ADA) of 1990. Providing effective accommodations allows students equal access to academic courses and activities. Their presence also contributes to the diversity of the student population.

What is a Psychiatric Disability?

Persons with a "psychiatric disability" have a diagnosable mental illness causing severe disturbances in thinking, feeling, relating, and/or functional behaviors that results in a substantially diminished capacity to cope with daily life demands.

A psychiatric disability is a *hidden* disability; it is rarely apparent to others. However, students with a psychiatric disability may experience symptoms that interfere with their educational goals, which may include, yet are not limited to:

- Heightened anxieties, fears, suspicions, or blaming others
- Marked personality change over time
- Confused or disorganized thinking; strange or grandiose ideas
- Difficulty concentrating, making decisions, or remembering things
- Extreme highs and/or lows in mood
- Denial of obvious problems and/or a strong resistance to offers of help
- Thinking or talking about suicide

Psychiatric Diagnoses

A student with a psychiatric disability may have one or more of the following psychiatric diagnoses (American Psychiatric Association, 1994).

Depression. This is a mood disorder that can begin at any age. Major depression may be characterized by a depressed mood most of each day, a lack of pleasure in previously enjoyed activities, thoughts of suicide, insomnia, and consistent feelings of worthlessness or guilt.

Bipolar Affective Disorder (BAD, previously called Manic Depressive Disorder). BAD is a mood disorder with revolving periods of mania and depression. In the manic phase, a person might experience inflated self-esteem, high work and creative productivity and decreased need to sleep. In the depressed phase, the person would experience the symptoms of depression (see above).

Borderline Personality Disorder (BPD). BPD is a personality disorder which includes both mood disorder and thought disorder symptoms. This diagnosis has both biological and environmental determinants. Individuals diagnosed with BPD may have experienced childhood abuse and family dysfunction. They may experience mood fluctuations, insecurities and mistrust, distortion of perceptions, dissociations, and difficulty with interpersonal relationships and limited coping skills.

Schizophrenia. This is a thought disorder that can cause a person to experience difficulty with activities of daily living and may experience delusions, hallucinations and paranoia. Schizophrenic individuals typically demonstrate concrete thought processing and appreciate structure and routines.

Anxiety Disorders. These are mood disorders in which the individual responds to thoughts, situations, environments and/or people with fear and anxiety. Anxiety symptoms can disrupt a person's ability to concentrate and focus on tasks at hand. Symptoms may be in response to real or imagined fears. Specific anxiety disorders include Generalized Anxiety Disorder, Obsessive-Compulsive Disorder, Panic Disorder, Social and

Specific Phobias, and Post Traumatic Stress Disorder.

The following conditions are behavior or personality disorders excluded from coverage under the ADA: transvestitism, transsexualism, pedophilia, voyeurism, gender identity disorders, compulsive gambling, kleptomania, and pyromania (Blacklock, 2001).

Functional Limitations

The following functional limitations related to psychiatric disabilities may affect academic performance and may require accommodations (Center for Psychiatric Rehabilitation, 1997).

- **Difficulty with medication side effects:** side effects of psychiatric medications that affect academic performance include drowsiness, fatigue, dry mouth and thirst, blurred vision, hand tremors, slowed response time, and difficulty initiating interpersonal contact.
- **Screening out environmental stimuli:** an inability to block out sounds, sights, or odors that interfere with focusing on tasks. Limited ability to tolerate noise and crowds.
- **Sustaining concentration:** restlessness, shortened attention span, distraction, and difficulty understanding or remembering verbal directions.
- **Maintaining stamina:** difficulty sustaining enough energy to spend a whole day of classes on campus; combating drowsiness due to medications.
- **Handling time pressures and multiple tasks:** difficulty managing assignments, prioritizing tasks and meeting deadlines. Inability to multi-task work.
- **Interacting with others:** difficulty getting along, fitting in, contributing to group work, and reading social cues.
- **Fear of authority figures:** difficulty approaching instructors or TA's.
- **Responding to negative feedback:** difficulty understanding and correctly interpreting criticism or poor grades. May not be able to separate person from task (personalization or defensiveness due to low self-esteem).
- **Responding to change:** difficulty coping with unexpected changes in coursework, such as changes in the assignments, due dates or instructors. Limited ability to tolerate interruptions.
- **Severe test anxiety:** such that the individual is rendered emotionally and physically unable to take the exam.

Instructional Strategies

Students with a history of psychiatric disabilities can be intelligent, sensitive, creative and interesting. You can employ strategies that will promote their success in your class. For example:

- Address a variety of learning styles (e.g. auditory, visual, kinesthetic, experiential, or combination of styles).
- Incorporate experiential learning activities.
- Be prepared to set behavioral expectations for all students in your class.
- Embrace diversity to include people with psychiatric disabilities.

Reasonable Accommodations

Some students with psychiatric disabilities may require accommodations to allow them equal access to classes, programs and coursework. An accommodation is the removal of a barrier to full participation and learning. The emphasis is on access, not on outcome. This is done by providing the student with a disability *equal access* to the content and activities of a course.

Each student with a disability is encouraged to register with the office that supports students with disabilities in order to receive accommodations. Personnel from this office typically send instructors a letter documenting specific accommodations required for the student with the disability. It is the responsibility of the instructor to provide the accommodations. It is the student's responsibility to fulfill the academic requirements of the course. The best solutions result when the instructor, student, and disability support service professional work cooperatively. Meeting as a group may facilitate problem-solving alternatives. Respecting the privacy of the student by not discussing his/her disability or accommodations with others outside of this meeting is essential. Review accommodations periodically with the

student to assess effectiveness and adjust to changing needs.

The following are typical classroom, exam, and assignment accommodations that may be recommended by the disabled student service professional for a student with a psychiatric disability.

Classroom Accommodations

- Preferential seating, especially near the door to allow leaving class for breaks.
- Assigned classmate as volunteer assistant.
- Beverages permitted in class.
- Prearranged or frequent breaks.
- Tape recorder use.
- Notetaker or photocopy of another's notes.
- Early availability of syllabus and textbooks.
- Availability of course materials (lectures, handouts) on disk.
- Private feedback on academic performance.

Examination Accommodations

- Exams in alternate format (e.g., from multiple choice to essay; oral, presentation, role-play, or portfolio).
- Use of adaptive computer software (e.g. Optical Character Recognition, allowing scanned text to be read aloud by the computer's sound card; or speech recognition for converting the spoken word to printed word on the computer screen).
- Extended time for test taking.
- Exams individually proctored, including in the hospital.
- Exam in a separate, quiet and non-distracting room.
- Increased frequency of exams.

Assignment Accommodations

- Substitute assignments in specific circumstances.
- Advance notice of assignments.
- Permission to submit assignments handwritten rather than typed.
- Written assignments in lieu of oral presentations, or vice versa.
- Assignments completed in dramatic formats (e.g. demonstration, role-play, and sculpture).
- Assignment assistance during hospitalization.
- Extended time to complete assignments.

Not all requested accommodations are "reasonable." An accommodation is *not* reasonable if:

- Making the accommodation or having the individual involved in the activity poses a direct threat to the health or safety of others.
- Making the accommodation means making a substantial change in an essential element of the curriculum.
- Making the accommodation would require a substantial alteration in the manner in which educational opportunities are provided, such that the course objectives are altered.
- Making the accommodation would impose an undue financial or administrative burden to the institution.

References

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Resources

DO-IT has created a videotape, *Building the Team: Faculty, Staff and Students Working Together*, that features postsecondary faculty and administrators and students with disabilities sharing useful information and experiences about how to effectively accommodate students with disabilities. To order this videotape, which is captioned and audio described, send $25 to DO-IT. You may also find the following resources useful as you explore this topic further.

American Academy of Psychiatry and the Law
http://www.emory.edu/AAPL/

American Psychological Association
http://www.apa.org/

Anxiety Disorder Association of America (ADAA)
http://www.adaa.org/

The Faculty Room, DO-IT
http://www.washington.edu/doit/Faculty/Strategies/Disability/Psych/

Mental Health
http://www.mentalhealth.com/

National Mental Health Association
http://www.nmha.org/index.cfm/

National Alliance for the Mentally Ill (NAMI)
http://www.nami.org/

National Institute of Mental Health (NIMH)
http://www.nimh.nih.gov/

Grants and gifts fund DO-IT publications, videotapes, and programs to support the academic and career success of people with disabilities. Contribute today by sending a check to DO-IT, Box 355670, University of Washington, Seattle, WA 98195-5670.

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About DO-IT

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